



Family Caregiver

Sharing Information & Giving Support to Hawai'i's Family Caregivers

VOL. 2 • ISSUE 2 • 2003 • THE EXECUTIVE OFFICE ON AGING • DEPARTMENT OF HEALTH

A Caregiver's Story

by Anonymous

In May 1996, Mom gave us a scare when she failed to return from a dental appointment. She did not call home for a pick-up as instructed and it was now evening. Finally, a Good Samaritan brought her home. Mom had been wandering around Kaimuki for hours trying to get home. Dad began scolding her and couldn't stop yelling at her, as if somehow it would make everything right again. This was the wake up call. Although Mom's behavior had been changing, I attributed it to the aging process and was not very concerned.

In September 1996, after seeing several specialists and taking many tests, an MRI revealed multi-infarct

dementia. "Thank God it's not Alzheimer's disease," I thought, not knowing the progression would be the same. At first, gradual changes went unnoticed. There was no obvious decline in her skills, as I had been doing most of the household chores since I was a teenager. Typical of many Japan-



ese families, my father and brother did not share in the daily chores.

In August, I was awakened at 4:00 am by a neighbor who had found Mom wandering around in her yard. Mom needed to have activities to tire her out, and to keep her days and nights coordinated. With the assistance of Project Dana, I decided to place Mom in the Franciscan Adult Day Care twice a week. Initially, she was one of the higher functioning participants and enjoyed the program.

I also began attending monthly Alzheimer's Caregiver Support meetings at Project Dana, where I received enormous emotional support I was not able to get from my family. I was a "one man act," doing all the work

and making all the decisions alone.

Mom's condition deteriorated, and by 1999, she was unable to manage self-care. She became incontinent and less ambulatory. This increased the time and effort needed to care for her. I continued to work full-time, which became my respite from caregiving, but it only added to my stress. Dad became increasingly impatient with her and drowned himself in alcohol (12 beers daily), which made him undependable. However, he managed to transport Mom to day care twice weekly. When I got home from work, he would be passed out on the couch in front of the TV and Mom would be wander-

ing around the house getting into everything, which I then had to clean up. I was caring for and managing financial and legal matters for both parents now. My brother came home once every two years for

about a month, and then returned to California. There was no communication or indication of concern or support. Like Dad, he could not face the reality of the situation and had built a wall of stoicism and denial, which I could not penetrate.

In early 2000, I realized that Mom needed closer supervision, so she attended adult day care everyday. She was happy there and received lots of personal attention. Dad continued to transport her, although it
(Continued on page 2.)



Where Do I Start?

The best place to start in getting information on caregiver services in your community is your county office on aging. They can be reached at the following numbers:

Honolulu Elderly Affairs Division
523-4545

Kaua'i Agency on Elderly Affairs
241-6400

Maui County Office on Aging
270-7755

Hawai'i County Office of Aging
961-8600 (Hilo)
327-3597 (Kona)

A Caregiver's Story

(Continued from page 1.)

was unsafe due to his drinking. His behavior toward Mom was bordering on abuse and neglect. The day care staff observed this behavior and contacted Adult Protective Services. As a result, I placed Mom in a private care home that provided 24-hour supervision. At that point, I was totally exhausted with "caregiver burnout." I was afraid that I too, might become abusive due to sheer frustration and fatigue. In August, with a lot of anxiety, I took Mom to a highly recommended care home in Waipahu. I felt a tremendous sense of relief mixed with guilt for leaving her there. The bad feelings diminished knowing that she was in good hands. The caregiver was competent, kind and patient. Mom adapted very well and did not want to come home.

In early 2001, I stopped Dad's driving and could then control his beer consumption. He was allowed 5 beers a day, which was gradually decreased. I was weary and downhearted, partially due to Mom's condition, but also because I knew that I needed to continue caring for Dad for the next few years. I had no life of my own, and I was depressed and physically exhausted.

Within a short time, Mom's condition rapidly declined. Her speech became minimal. She required a wheelchair, as her legs no longer functioned. She would not eat or open her mouth, even to drink. It took an hour just to get her to drink a can of Ensure. What a contrast to those earlier days when I hid things, or when she would eat everything in sight! The doctor suggested that a feeding tube be placed in her stomach. After discussion with Mom, Dad, and other family members, I decided not to do the procedure. It was not what Mom wanted. It would only prolong her suffering and not improve her quality of life. There would be no hospitalization, no heroic measures and no resuscitation. We would use hospice for comfort only.

Mom died in January 2002 of "terminal Alzheimer's disease." I am at peace with the decision I made on her behalf, knowing that her journey

ended the way that she wanted, in her own time. In March 2002, I got married and moved to a new home, struggling with leaving Dad alone. I felt guilty and worried, but decided that I needed to live my life. I deserved some happiness and peace. My husband is considerate and nurturing. He is involved with Dad's care and provides constant support and humor. He was a caregiver to his mother until she died, so understands my situation.

I now have to contend with Dad, who is very difficult, stubborn, non-communicative and refuses to see a physician. The one time I finally got him to the doctor, he was prescribed Aricept, which is supposed to improve cognitive function. With his decreased drinking (2 beers a day) and medication, his functional level improved. But it improved so much that he realized that he could walk to the market and buy his own beer.

Upcoming & etc...

Maui Family Caregivers Training Academy

June 28 through July 19, 2003

See story on page 4 for more info.

Caring for Family, Caring for Yourself: A Caregiver's Conference

Saturday, September 6, 2003

Sheraton Waikiki

Register early for session choices.

Last year, sessions were filled up fast and people were turned away. For more information, call the Elderly Affairs Division I&A Senior Hotline at 523-4545, or visit www.elderlyaffairs.com to download the registration form.

Seniors' Fair: The Good Life Expo

September 26 - 28, 2003

Blaisdell Exhibition Hall

For more information, contact Barbara Garofano at 832-7878, ext. 12.

For more information about **monthly caregiver support groups**, visit

www.elderlyaffairs.com to download the Caregiver Education Resource Guide. The guide describes caregiver support groups available to the public, and more.

He now walks daily to buy his 6-pack. However, he still refuses outside assistance, and just exists day to day with his beer and sporadic eating. I take food over and check on him every other day, calling him daily. On weekends, we clean the house, do the laundry, maintain the yard and do whatever needs to be done. I know that I cannot tolerate another stint of intensive caregiving, so when the time comes, Dad will be placed into a care home where he will have 24-hour supervision.



E LOA KE OLA



MAY LIFE
BE LONG

The Executive Office on Aging is the state agency whose mission is to assure the well-being of Hawaii's 200,000+ adults age 60 and over.

Phone: 808-586-0100
www.hawaii.gov/health/eoa

Linda Lingle
Governor

Dr. Chiyome Fukino
Director of Health

Wayne Hikida
Chair, Policy Advisory
Board for Elder Affairs

Pat Sasaki
Executive Director
Executive Office on Aging

Wes Lum
Caregiver Resource Initiative
Project Coordinator



We provide access to our activities without regard to race, color, national origin (including language), age, sex, religion, or disability. Write or call EOA or our departmental Affirmative Action Officer at Box 2278, Honolulu, HI 96801 or at 808-586-4616 (voice/tty) within 180 days of a problem.

Project Dana: Caring for the Caregiver



Left: Caregivers enjoy respite at the peaceful grounds of the Contemporary Museum.

food, including lunch. The second session is a recreational outing to create some balance and fun in the lives of stressed and fatigued caregivers, restoring and rejuvenating their spirits. All costs are covered by project funds (thanks to the National Family Caregivers Support Pro-



Caregiving precludes having a normal lifestyle. It limits or eliminates social and recreational activities, resulting in a caregiver's sense of isolation and alienation. Typically, the burdened caregiver becomes fatigued and has no time or energy to reach out for help, either from resources within the family or in the greater community. There is no one to discuss routine concerns and problems. The cycle continues, and takes its toll on the caregiver's physical, mental, emotional and spiritual well-being.

This scenario is what inspired the creation of a new concept of caregiver support groups. Project Dana's support group began as a demonstration project in 2002. The idea was to take caregivers out of their home, out of their daily rut, and place them into a fun, healthful, nurturing activity-based program. Volunteer respite care in a group setting or within the home was set up, while the caregivers attended the support group. Transportation was provided to those who needed it. Project Dana's support group was a success! The combined services boosted caregiver morale, gave caregivers something enjoyable to anticipate, provided networking opportunities and

Featured Caregiver Support Group

Project Dana

Contact: Eunice Sakai
945-3736 to apply

friendships with other caregivers and produced positive stress-relieving health benefits.

The sessions are held from 9:00 am to 1:00 pm, usually on the second and fourth Wednesdays of each month. One session is a support group meeting that includes a guest presenter, therapeutic activities, social time and delicious, nutritious



Above: Transportation is provided for caregiver excursions. Caregivers take a boat ride to Coconut Island (top) and get a lift on a bus (bottom) to Senator Fong's Gardens.

gram administered by the State of Hawai'i Executive Office on Aging through the Elderly Affairs Division, City and County of Honolulu). Donations, however, are welcomed and greatly appreciated.

A primary family caregiver who is providing hands-on caregiving may qualify for Project Dana if the care receiver is 60 years of age or older. Project Dana is now accepting referrals, and will continue to do so on a space available basis. The new fiscal year begins July 1, 2003. Call Eunice Sakai at 945-3736 to apply.



Caregivers feed fish outside the Maritime Museum.



H O N O L U L U

The Power of Sharing

Since the implementation of the National Family Caregiver Support Program, the development of family caregiver support groups in Honolulu has been a vital service provided by the City & County of Honolulu Elderly Affairs Division (EAD).

These groups offer emotional support, a variety of stress relief activities, counseling and information on easing caregiving tasks. The "power of sharing" is clearly evident when family caregivers attend a support group session. The power of collective wisdom and creative problem solving, as well as the empathetic ear, has brought strength to those who must face the daily service of caregiving. Caregivers who experience the common strains of loneliness and frustration often bond together within the group and build a vital network of friends.

The following are just a few of the comments we receive from caregivers:

It is really helpful to me just to hear that someone else has a similar problem. I don't even need to hear a solution—just that someone else has the same problem.

I feel energized after attending a support group. I feel I can go on.

Attending the support groups has helped me cope with the care of my 92-year old father and my 87-year old mother. Thank you.

I never miss a session. I no longer feel alone.

I feel supported and pampered to get this break. Thank you.

EAD's Information & Assistance (I&A) Unit conducts outreach to educate caregivers and the general public about the value of respite and other support programs such as long-term care options and specialized trans-

portation. There is also a monthly brown bag meeting to help government employees who are family caregivers. The general public is invited to attend any of these meetings. Call 523-4545 for more information.

In addition to caregiver support programs, EAD promotes greater awareness of caregivers needs, provides information about available resources, identifies challenges facing caregivers, advocates on their behalf and creates and expands opportunities for caregivers.

There are a number of support groups conducted island-wide. Call 523-4545 to find out locations, dates and times. Below are support groups currently flourishing and funded through the National Family Caregiver Support Program:

The Alzheimer's Association-Aloha Chapter offers educational sessions at locations throughout O'ahu on the need for good nutrition during the various progression stages of the disease. The training will focus on increasing caregiver skills in dealing with individuals throughout the progressive stages of the disease. In FY 2004 and 2005, the agency will expand these sessions into a "Caregiver University" that will include information on consumer/ physician partnerships, self-care, managing challenging behaviors, hiring and managing in-home caregivers and legal and financial information. Call 591-2771 for more information or scheduled sessions.

The Sister Maureen Intergenerational Learning Environment's Franciscan Adult Day Care program offers "C.A.R.E. Club," which includes a wide range of caregiver support, education and training, and individual and group counseling services. Call 988-5678 to sign-up to participate or for more information.

Child and Family Service - Honolulu Gerontology Program's Ohana Care provides case management, counseling, education and training in an all-inclusive family unit. This service delivery approach enhances not only the caregiver's skills and knowledge, but also allows the care

receiver to remain at home and in their own environment longer. Ohana Care also offers supplemental services, which are provided on a limited basis to complement the care provided by caregivers. Call 543-8468 for assistance.

Kokua Kalihi Valley's (KKV) Elderly Programs are available to caregivers residing in the Kalihi Valley area. Services offered include respite, a temporary substitute support or living arrangement for older persons so caregivers have periods of respite. Subsidies for caregivers to purchase additional hours of respite are also available. KKV has caregiver support group meetings twice a month. Call 848-0977 for more information.

The Moiliili Hongwanji Mission Project Dana "Caring for the Caregiver" program addresses the caregiver's physical, mental and spiritual needs. Services nurture caregivers in group settings by providing relaxation, therapeutic and informational sessions. Social outings and exercise activities are included. Trained volunteers within Project Dana's network of organizations provide respite and transportation services. Individual counseling is also available. For more information call 945-3736.

M A U I

Family Caregivers Training Academy Begins in June

The Maui County Office on Aging, a division of the County Department of Health and Human Concerns, will sponsor a series of Maui Family Caregivers Training Academy sessions beginning in June.

These instructional sessions are sponsored by the National Family Caregivers Support Program of the federal Administration on Aging. They are available at no charge to anyone providing family caregiving in their home or in the home of a loved one or friend.

Dr. Michael Cheang, Assistant Professor at the Center on Aging and a lecturer in the Family and Consumer Sciences Department of the University of Hawai'i at Manoa,

(Continued on page 7.)

It worked for me

with Karen Koles



Q: Can you give me some practical hints about handling incontinence? My father is bedridden.

A: Cut a slit in an infant's diaper midway between the fastening tapes (see photos below). Insert the penis through this slit and fasten the tapes. Then complete the process by fastening the adult diaper tapes.



This diaper will absorb urine for approximately two hours. It will soon become apparent how frequently you

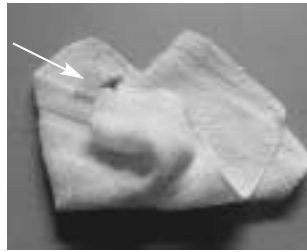
will need to change it.

Q: How can I make bed baths easier?

A: It's easier to do bed baths if you use washcloths and face towels instead of the regular-sized bath towels. These larger towels can sometimes be cumbersome to handle while giving a bed bath. Besides, the smaller towels are easier to launder. They are less bulky and dry more quickly.

Sew bright yarn in the corner of the washcloth (see photo below) that you'll use to "soap" your loved one. Don't attach

any yarn to the "rinse" washcloth. Using this system we never got our washcloths mixed up!



Q: My mother is still ambulatory. I am afraid that someday, in spite of our efforts, she may wander away. What precautionary measures should I take?

A: On an index card or tag, write

down your mother's name and the first names and phone numbers of several relatives or friends who are willing to help in case Mom wanders away. Take this card to a shop to have it laminated. Punch a hole at an appropriate place. When you help Mom get dressed in the morning, attach this card with a safety pin in a location that Mom cannot reach or remove (on her back). If Mom wanders away, anyone will be able to identify her and notify you or your family.

Editor's note: Caregivers may also wish to check into the Safe Return Program, a national wanderers' registry for people with Alzheimer's disease and related disorders. Call the Alzheimer's Association-Aloha Chapter at 591-2771 or 1-877-43-ALOHA from the Neighbor Islands for more information.

Q: My loved one tends to kick off blankets at night. What can I do to combat this problem?

A: Instead of covering Dad with one regular-sized blanket, we used baby-sized blankets, one to cover his lower body and another to cover his upper body. On a cold night, we'd use four baby blankets. We found that even if he managed to kick off a blanket, the rest of his body would be covered. An additional benefit, if any of his blankets got soiled, our wash load was only half as large as it would have been if we had used regular-sized blankets.

Q: What should I include in Mom's "day bag" that we send with her when she spends the day at my brother's house?

A: Besides the obvious (extra clothes, diapers, medication, etc.), include the following in a ziplock bag: a copy of her "living will" or advance directive for health care, a copy of her assignment for power of attorney, the name and phone numbers of her physicians and a list of her medications with the prescription directions.

Disclaimer: The suggestions given by Ms. Koles are tips that she found helpful while caring for her father and are not to be interpreted as fact or intended to guarantee similar results while caring for your loved one.

Beginning New Medications

by Randolph M. Oba, PharmD

Whenever beginning new medications, one must pay attention to any side effects or adverse drug reactions that may occur. This is especially crucial in the first two weeks of therapy. Don't rely on memory. Keep a daily diary during this period of time. Write down any suspected side effects with special attention to when they occurred and with respect to when the last dose of medication was taken.

Dizziness, light-headedness, chest pain, bleeding, unusual tiredness, nausea or diarrhea can be troublesome. If these symptoms occur, call your physician immediately.

Drug interactions can be another problem. This is especially true when

a patient sees multiple physicians. An individual physician may not be aware of the medications being prescribed by other physicians. Never assume that they have communicated with each other about your medical history. It is a good idea to order all of your medications from the same pharmacy. The pharmacist can usually spot a drug interaction and would then contact the physicians to insure safe and effective therapy.

Remember, if you have any doubts or questions about drug therapy, always write them down. You can then call the physician or the pharmacist, depending on the nature of the question. Again, don't rely on memory. In the excitement or anxiety of an office visit or a visit to an emergency room, it's difficult to remember every question.

Caregiver Policies:

A Review of Caregiver Legislation During the 2003 Regular Session

To fully engage our advocacy role in caregiver-related policy issues, the Executive Office on Aging relies on your knowledge, experience and perspectives to help us prepare for and participate in the legislative process. As such, we would like to report on some of the measures of the 2003 Legislative Session that we believe affect Hawai'i's caregiving community. It is our hope that this information will assist you in making a full and objective assessment of the 2003 Regular Session.

Note: The status of these measures are current as of June 23, 2003.

Support for Family Caregivers

(HB 169). This measure would have provided a system of support for family caregivers by:

- Authorizing the Executive Office on Aging to hire a Family Caregiver Services Coordinator.
- Establishing an advisory board on family caregiving.
- Funding training for family caregivers of seniors.
- Funding respite for family caregivers of seniors.

This bill failed to pass the Legislature.

Long-term Care Financing (SB 1088).

This measure would have created an affordable method of financing long-term care services by establishing:

- A long-term care income tax to pay for long-term care benefits.
- A long-term care income tax credit for amounts paid for the purchase of long-term care insurance.

This measure was vetoed by the Governor.

Use of Sick Leave for Family Leave Purposes (HB 389 enacted as Act 144, Session Laws of Hawai'i 2003).

This measure would allow caregivers to attend to a child, parent, spouse

or reciprocal beneficiary with a serious health condition during work hours. It would require an employer who provides sick leave to permit employees to use up to 10 days of accrued and available sick leave for family leave purposes.

Consumer Direction (HCR 205/SCR 172). These measures would have given caregivers and care-receivers meaningful choices regarding the

It is our hope that this information will assist you in making a full and objective assessment of the 2003 Regular Session.

care they provide and receive. The development of the Self-determination Demonstration Project by both the Executive Office on Aging and the Department of Health, would have advanced consumer-directed services within the State. Consumer direction is a philosophy and an orientation to the delivery of home and community-based services. Informed consumers would make their own choices about the services they receive, assess their own needs and determine how and by whom these needs should be met. However, these resolutions were not adopted by the Legislature.

Caregiver Tax Credit (HB1421/SB 1583).

These measures would have relieved financial burdens experienced by caregivers by creating a Caregiver Tax Credit of \$2,000 for the expenses of caring for an elderly relative. However the bill failed to pass the Legislature.

Respite Care Services. These measures would have provided emotional, physical, and mental relief for caregivers by:

- Establishing the Hawai'i Respite Services Trust Fund to provide a dedicated source of funding to caregivers for respite services. **(SB 939)**
- Appropriating funds for respite

care for families of individuals with special needs, including older adults and adults with disabilities **(HB 226/SB 953).**

- Creating an "elder wellness" demonstration project to provide services, including respite care, that would assist older persons to remain in their homes **(HB 711).**

However, these measures failed to pass the Legislature.

Elder Abuse (SB 78). This measure would protect elders by authorizing the Attorney General to seek civil penalties for dependent elder abuse or neglect. It would have provided for enhanced civil remedies in private lawsuits arising from the abuse or neglect of a dependent elder.

This measure was transmitted to the Governor for her signature.

Unannounced Visits to Adult Residential Care Homes (HB 914).

This measure would mandate the Department of Health to annually conduct unannounced "visits" of all adult residential care homes to ensure the health, safety and welfare of each resident. Annual inspections for relicensing would be "conducted with notice, unless otherwise determined by the department."

The bill was transmitted to the Governor for her signature.

Funding for Caregiver-related Medicaid Programs (HB 1586/SB 884).

These measures would assist families on Medicaid by appropriating funds to the Department of Human Services for Medicaid programs, including the Residential Alternative Community Care ("RACC") program and chore services. The RACC program provides qualified individuals with placements in community-based residential facilities, including adult foster homes, adult residential care homes and assisted-living facilities as a less costly alternative to institutional care.

However, the bill failed to pass in the Legislature.

Disclaimer: The content of this article is for information only, and does not reflect an endorsement by the Department of Health or the Executive Office on Aging.

Chiropractic Care: Healing From The Inside Out

As a caregiver, your health is important. If you are not already doing so, think about performing some daily activities that help you live healthier: exercise regularly, eat balanced nutritional meals, drink water frequently throughout the day, get ample rest and relaxation, and stay calm. Another tool that is used by millions of families worldwide to improve their quality of health is chiropractic care.

Chiropractic care is a health care profession whose purpose is to diagnose and treat vertebral subluxation, which is a physical condition associated with illness that occurs inside your body adversely affecting your health. It is also known as nerve interference because it affects your nervous system. Vertebral subluxation causes the body to work improperly or poorly. It puts you at risk for nerve, muscle, joint and bone damage, which are associated with symptoms such as pain and discomfort. It can also lead to chronic

illnesses arising from a poorly working neuro-musculoskeletal system.

Having a properly working nervous system is important to mental, physical and emotional well-being. Caregivers spend much of their days and nights bending, twisting, lifting, carrying heavy objects, and remaining in awkward positions for long periods of time. Chiropractic treatment helps to improve your strength, flexibility, stamina and coordination, which are essential elements for a caregiver. Only Doctors of Chiropractic are trained and



skilled in treating vertebral subluxations. This is known as chiropractic adjustment. A chiropractic adjustment uses the doctor's hands to apply appropriate force to joints, thereby enabling them to work properly. Chiropractic adjustment can also reduce nerve interference so that your body can heal from the inside out. Doctors of Chiropractic are also trained to recommend therapy and give proper nutritional

advice.

Sometimes, well-meaning caregivers who have previously been helped with chiropractic adjustment procedures tell their families and friends that chiropractic care "cured" their pain or "cured" their asthma. To "cure" is a misconception. To "heal" is probably a better word. After all, quality of health is a process, not a goal. Many patients find that the combination of chiropractic adjustments and therapy helps to "heal," thus encouraging the continuation of their healthy lifestyle change because of the benefits they receive. You can find a chiropractor in the yellow pages, by word of mouth or by contacting the Hawai'i State Chiropractic Association.

In conclusion, chiropractic is a lifestyle change which may enhance your feelings of wellness, help you sleep better and achieve balance between your mind, body and spirit. Specifically, chiropractic can help caregivers maintain a healthy lifestyle.

Having been a caregiver herself, Dr. Kathleen Yim, DC, LMT, speaks from experience. You can contact her at 808-263-3322 or e-mail drkathy@absolutechirocare.com

County Corner

(Continued from page 4.)

will address several topics of interest to caregivers. Some of these topics include how the body ages, chronic diseases common to older adults, the health and well-being of caregivers, prevention of burnout, strategies for caregiving, death and dying, the continuum of resources, stress relief and self-care.

Academy sessions are scheduled from 8:00 am to 1:00 pm at the Hawai'i Government Employees Conference Room in the David Trask Building, 2145 Kaohu St., Wailuku, Maui, on the following Saturdays: June 28, and July 5, 12 and 19, 2003.

Classes are free, and all training materials, including a caregiving manual, will be provided. Seating is limited. Interested persons are asked to register by calling John A.H.

Tomoso, Maui County Executive on Aging, at 270-7350.

ISLAND OF HAWAII

"It Takes A Whole Community To Care For Our Caregivers"

As family members or close friends, we often do not label or recognize ourselves as caregivers. And yet, the role of a caregiver is a big responsibility. Often, it means a significant and profound impact on our lives. The National Family Caregiver Support Program has cast a bright light on the importance of recognizing the hard work of caregivers and on developing a flexible system of support so they can strengthen their ability to provide care. But it is essential for the whole community to embrace the efforts of these family and friends.

One very strong partner of the Hawai'i County Office of Aging

(HCOA) is the Hawai'i Community Caregiver Network (HCCN). A volunteer coalition, HCCN serves as a vehicle for information and advocacy on behalf of family caregivers in West Hawai'i. The coalition was formed as a result of Area Plan meetings in 1995 with members from private and public elder care agencies and programs, churches, community organizations and caregivers. HCCN's slogan is "It takes a whole community to care for our caregivers."

Through funding received from various organizational grants, HCCN has been hard at work to address the concerns of caregivers. In 1996, they investigated the needs of caregivers in West Hawai'i. In 1999, HCCN coordinated Carousel of Care, a caregiver conference combining educational and informational sessions with self-care clinics that included massage, aromatherapy,

(Continued on page 8.)

County Corner

(Continued from page 7.)

art and flower therapy, etc.

They partnered with HCOA in 2000 to continue the conference prototype. The conference has become an annual event in Kona in the month of November (National Family Caregiver Month), allowing the caregivers to enjoy a day of respite and relaxation.

HCOA appreciates and recognizes HCCN and other community partners who help maintain the success of the caregiver program on the Island of Hawai'i.

Don't forget to mark September 9, 2003 on your calendar for our annual caregiver conference, Caring for Family, Caring for Yourself at the Hawai'i Naniloa Resort. Please call 327-3597 for more information.

K A U A ' I

North Shore Family Caregivers Support Group

Kaua'i's North Shore Family Caregivers Support Group meets monthly on designated Fridays from 10:00 am to 12:30 pm at Kalihiwai Ridge.

Since its inception in October 2002, discussions have revolved around a range of creative topics. These topics have included "Understanding Mothers & Daughters: Their 5 Relationship Styles Compared to 6 Types of Caregiving," "Affirmations to Support our Family Caregiving," the PBS video *And Thou Shall Honor*, and book reviews of *Love, Honor and Value*, *Another Country*, and *Tuesdays with Morrie*. In addition to the meetings, half-day field trips were arranged to give caregivers enjoyable experiences outside their usual routine. These excursions included the Hindu Monastery and Sunset Music & Pupus at Pavilion.

The public is welcome to attend future support group meetings during the 2003 Summer & Fall months:

- **June 13, 2003** – *Resentment: You can feel all of your feeling. All of your feelings are OK with me.*
- **July 11, 2003** – *Guilt: How to stop punishing yourself for not fixing what you cannot prevent.*
- **August 15, 2003** – *Grief: A hospice chaplain shares.*
- **September 12, 2003** – *Abuse: How to deal with difficult behaviors that can become abusive.*

- **October 10, 2003** – *Intimacy: A casualty of family caregiving in the home.*

A field trip has also been planned to Na 'Aina Kai Botanical Gardens during the summer. The date is still to be determined. For more information about the North Shore Family Caregivers Support Group, please contact Heidi Caglayan at 828-6417 or by e-mail at caglayans9@aol.com.

Become a Member of the Hawai'i Family Caregivers Network

Caregiver's Name: _____

Phone No. _____

Mailing Address: _____

E-Mail Address: _____

Age: ____ Male/Female: ____ I am caring for my (e.g. mother, uncle, neighbor, etc.): _____

How long have you been the caregiver? _____

Are you the only caregiver? _____

Approx. no. of care you provide per month: _____

Members' personal information will be kept strictly confidential.

E LOA KE OLA



Executive Office on Aging
No. 1 Capitol District
250 South Hotel Street, Suite 406
Honolulu, HI 96813

MAY LIFE BE LONG